

Michigan Association of School Nurses (MASN)
TESTIMONY IN SUPPORT OF SENATE BILLS 237-239

June 4, 2013

Greetings Representative Haines and Committee Members, my name is Ronda Harrison and I am here today as the President of Michigan Association of School Nurses to voice support of SB 237, SB 238, and SB 239. These bills seek to modify the required grade level for school reporting on immunization status from the current 6th grade level to the 7th grade, and if passed, will support better management of immunization administration, compliance, and reporting.

Rationale for MASN Support of Senate Bills 237, 238, and 239:

The proposed change from 6th grade reporting to 7th grade reporting has to do with the current adolescent immunization schedule which calls for administration of certain immunizations between the ages of 11-12 years. Problems with the 6th grade reporting have arisen in part because:

- Some students enter 6th grade at 10 years of age. These students are not yet eligible to receive the required adolescent vaccines. (The Advisory Committee for Immunization Practices (ACIP) schedule calls for administration of adolescent vaccines on or after the 11th birthday but before the 13th birthday);
- The vast majority students in 6th grade remain in the 11-12 year old window throughout their 6th grade academic year and are therefore not technically "behind" with the required adolescent immunizations.

By changing the reporting to 7th grade, **all** students will have turned 12 years old before the second reporting date of the academic year (February 1st), and in theory should be current with all required adolescent immunizations. For the relatively few students that may progress through the 7th grade lacking one or more of the required adolescent vaccines, ample opportunity exists for schools and primary care providers to support families in meeting the immunization requirements before the student's 13th birthday.

Senate Bills 237, 238, and 239 as currently written:

- **Do not** change immunization requirements or schedules, they only change the grade in which schools report on students' immunization compliance;
- **Do** support improved adolescent immunization compliance rates because the school evaluation of immunization status will occur at a grade level when all students are eligible to receive the required vaccines;

- **Do not** interfere with the primary care provider's ability to, during each office visit, evaluate the patient's immunization status, administer all age-appropriate vaccines, and provide consultation regarding future immunization needs; and
- **Do** allow schools to be a more effective partner in supporting appropriate preventative health services provided by primary care providers.

MASN supports Senate Bills 237, 238, and 239 because 7th grade reporting is more consistent with ACIP guidelines, less burdensome for schools, parents and practitioners, and eliminates a loop hole that might allow a 10 year old to miss appropriate vaccinations.

Thank you for your consideration of our views. Please do not hesitate to contact me with any questions or concerns.

Ronda Harrison BSN, RN, NCSN
President MASN
rondaharrison1@sbcglobal.net